

Keeping New Jersey Healthy



Commissioner O'Dowd joins Governor Christie at a press conference to announce the activation of a statewide Ebola preparedness plan at Hackensack University Medical Center.

State Takes Comprehensive Public Health Approach in Response to Ebola

By Mary E. O'Dowd, MPH, Commissioner
New Jersey Department of Health



The world's largest Ebola outbreak is based in West Africa, but we have seen that the reach of this disease has expanded well beyond with cases diagnosed in the United States and Spain. The need for vigilance is evident, and I am continuing to work with partners throughout New Jersey's healthcare and public health community – as well as federal, state and local agencies – to enhance our comprehensive response.

We know that the risk of infection here in New Jersey is low, and we know that the virus can only be transmitted by contact with the body fluids of a person who is showing symptoms. But we have also seen two Dallas nurses become infected after treating a Liberian traveler who later died of Ebola – the first case to be diagnosed in the United States. While the nurses have successfully completed treatment, we must learn from their experiences. This means continued training and practice in personal protective equipment and standard of care so we can safeguard all healthcare workers.

As part of this effort, Governor Christie activated a comprehensive Ebola preparedness plan to direct all activities of key state departments, hospitals, the medical community and homeland security to protect the public and create a strong line of defense against Ebola in New Jersey including the creation of the Ebola Virus Disease Joint Response Team (EVD-JRT).

The Department of Health and its health care and public health partners are taking a comprehensive approach in responding to Ebola through public health actions to prevent potential exposure, ensure the health care system's preparedness and provide community education.

Some of the Department's recent initiatives include:

Preventing Exposure

- Ordered more than \$1 million in Personal Protective Equipment (PPE) for health care workers (10/22/14, 10/31/14)
- Partnering with the Rutgers University School of Public Health to provide six, half-day training programs for health educators, starting Oct. 31, addressing the guidance regarding Ebola, its transmission pathways, and PPE requirements. The trainees will then return to their health departments and health care facilities to

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Governor Christie: We Are Not Going To Stoke The Hysteria

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Ebola Information for Friends and Family Returning to New Jersey from West Africa



[Click here for information](#)

Ebola Virus Disease (EVD) Interim Guidance for K-12 Schools

[Click here for information](#)

What You Should Know About Hosting a Visitor from West Africa

[Click here for information](#)

Commissioner's Message, *continued from page 1*

- train healthcare providers in those locations
- Active Community Monitoring guidance sent to Local Health Departments (10/24/14)
- EVD-JRT coordination of quarantine, isolation and private travel for individuals who are symptomatic or at risk of exposure

Health Care System Preparedness

- Designated Tier II hospitals: University Hospital in Newark, Hackensack University Medical Center and Robert Wood Johnson University Hospital in New Brunswick (10/22/14)
- Tier II designation was based on consultation among the Department, its Divisions of Health Facilities and Evaluation, and Public Health Infrastructure, Laboratories and Emergency Preparedness, and the hospitals themselves.
- CDC and DOH teams visited Tier II hospitals to provide technical assistance through onsite visits (10/23/14-10/26/14)
- All other NJ hospitals will be provided with an Ebola preparedness assessment and checklist tool to assist them with their ongoing efforts to effectively triage, isolate and protect
- Finalizing ability of DOH lab to test for the Ebola virus
- Conducting conference calls with several hundred representatives of hospitals, EMS, local health and ambulatory care providers to review guidelines for Ebola infection prevention, evaluation and treatment
- Hosted a webinar for public health officials so they can provide community education
- All hospitals conducting drills in their Emergency Departments

Community Education

- Provided guidance to New Jersey schools on how to handle K-12 students who have arrived from African nations with Ebola: http://nj.gov/health/cd/vhf/documents/ebola_school_guidance.pdf
- Developed brochure posted on website for Friends and Family Returning to New Jersey from West Africa posted on DOH website: http://nj.gov/health/cd/vhf/documents/West_Afr.pdf
- DOH Office of Minority and Multicultural Health and DOH health educators met with key leaders from the NJ West African communities to discuss ways community members can become better informed about the Ebola epidemic
- DOH professionals participating in educational sessions and community meetings with New Jersey's West African communities
- DOH is completing a "phone home" campaign to encourage West African residents to call friends/family in affected West African countries to provide accurate Ebola information. Campaign includes a video message being filmed about Ebola that can be sent via text or texting apps to friends/family in West Africa

Ebola resources are available at: <http://nj.gov/health/cd/vhf/> and cdc.gov



Gov. Christie announces the Ebola Virus Disease Joint Response Team on Oct. 22.



NJTV: State Epidemiologist Answers Ebola Questions



On Oct. 10 Commissioner O'Dowd received a flu vaccination at a Brick Township flu clinic. Also pictured: Susan Wittman, RN, Ocean County Health Department, Ocean County Health Officer Dan Regenye and Ocean County Freeholder Gerry Little.

Governor Christie Activates Statewide Ebola Preparedness Plan

Ebola Virus Disease Joint Response Team to Execute Plan and Coordinate in Real Time

Governor Christie signed Executive Order 164 creating the Ebola Virus Disease Joint Response Team (EVD-JRT) that will direct and coordinate on all matters pertaining to New Jersey's public health response. Christie administration officials, state agencies and departments will work in a coordinated manner to ensure the health and safety of New Jersey residents is protected and to execute on decisions in an efficient and effective manner. The EVD-JRT will also form an advisory panel of additional administration entities, as well as representatives from the medical community.

CHRISTIE ADMINISTRATION EBOLA VIRUS DISEASE JOINT RESPONSE TEAM

This multiple-agency team will ensure responses to Ebola issues are in place. Departments include:

- Department of Health
- Office of Homeland Security and Preparedness
- Office of the Attorney General
- Department of Human Services
- New Jersey State Police
- Department of Education

The EVD-JRT will coordinate with federal and state partners, in addition to other state agencies:

- Department of Children and Families
- Department of Environmental Protection
- Department of Transportation
- New Jersey Transit
- Department of Military and Veterans Affairs

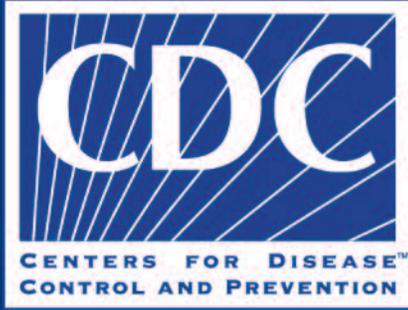
Read more and link to:

<http://nj.gov/governor/news/news/552014/pdf/20141022a.pdf>

It's Flu Season...Get Vaccinated

The Centers for Disease Control and Prevention (CDC) recommends that everyone 6 months of age and older get a seasonal flu vaccine each year. A flu shot is especially important for certain groups of individuals who are at higher risk of developing serious flu-related complications. These groups include: pregnant women, children under the age of 5, but especially younger than 2 years old, people 65 years of age and older, and people with certain chronic medical conditions such as asthma, heart disease, cancer and diabetes. People should take common sense measures to protect themselves against the flu including washing hands, covering sneezes or coughs, avoiding close contact with sick people and staying home from work or school when sick.

Find a **Flu Shot**



Ebola

How do you get the Ebola virus?

Direct contact with:

- 1 **Body fluids of a person who is sick with or has died from Ebola. (blood, vomit, pee, poop, sweat, semen, spit, other fluids)**
- 2 **Objects contaminated with the virus (needles, medical equipment)**
- 3 **Infected fruit bats or primates (apes and monkeys)**

Early Symptoms

Ebola can only be spread to others after symptoms begin. Symptoms can appear from 2 to 21 days after exposure.

- Fever
- Headache
- Diarrhea
- Vomiting
- Stomach pain
- Unexplained bleeding or bruising
- Muscle pain



When is someone able to spread the disease to others?

Ebola only spreads when people are sick. A patient must have symptoms to spread the disease to others.



MONTH						
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6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

After 21 days, if an exposed person does not develop symptoms, they will not become sick with Ebola.



Community Outreach & Events

October 2014



Dr. Brito attends kickoff of Project LAUNCH on Oct. 1. Pictured: Manny Jimenez, MD, MS, FAAP; Paul Dworkin, MD; Kasey Dudley; Sunday Gustin, RN, MPH; Dr. Brito and Fran Gallagher, MEd, NJAAP



Stefanie Mozgai, Director of the Div. of Health Facilities Evaluation and Licensing, addressed the crowd at the launch of the AtlantiCare Community Healthcare Access Program.



- October 1** Deputy Commissioner Dr. Brito attended the New Jersey Chapter American Academy of Pediatrics' kick-off of Project LAUNCH, an initiative that advocates for a broader use of developmental screening tools among pediatricians for patients up to 8 years of age.
- October 9** Dr. Brito was the keynote speaker at the New Jersey Medical School's Hispanic Heritage Month Event in Newark.
- October 9** Deputy Commissioner Bill Conroy participated in the Rutgers Eagleton Institute of Politics Center on the American Governor forum in New Brunswick.
- October 10** Commissioner O'Dowd received a flu vaccination at a Brick Township flu clinic hosted by the Ocean County Department of Health.
- October 14** Commissioner O'Dowd spoke to health care providers at the Horizon Blue Cross Blue Shield Patient Centered Care Summit in New Brunswick.
- October 16** Stefanie Mozgai, Director of the Div. of Health Facilities Evaluation and Licensing attended the launch of the AtlantiCare Community Healthcare Access Program in Atlantic City.
- October 22** Commissioner O'Dowd joined Governor Christie at an Ebola briefing held at Hackensack University Medical Center.

Congratulations:

Vaccine Preventable Disease Program was recently awarded a grant for almost \$2 million from the Centers for Disease Control and Prevention for enhancements to the New Jersey Immunization Information System (NJIS). The grant application process was highly competitive and awarded based on the applicant's grant score and prior track record with achieving grant deliverables. The funds will be used to implement a two-year project for infrastructure enhancements to NJIS to support ongoing interoperability efforts between NJIS and provider electronic health record systems (EHRs), health information organizations (HIOs) participating in the New Jersey Health Information Network (NJ-HIN), pharmacies, and other organizations. This new project builds upon recent improvements to NJIS to implement a new interface management system that is aligned with the current national standards for interoperability.

Please click on the link below to view NJIS interface-related documents.

<https://njiis.nj.gov/njiis/html/documents.html>

NJ DOH and Partners Launch Vaccine Awareness Poster and Video Contest

Protect Me With 3+ Contest Geared Toward Increasing Vaccinations for Tdap, HPV, Meningococcal and Flu Among New Jersey Youth

The New Jersey Department of Health and The Partnership for Maternal and Child Health of Northern New Jersey announced the launch of the third annual Protect Me With 3+ poster and video contest to raise awareness about the importance of adolescent immunizations among pre-teens, teenagers and parents, and increase vaccination rates.

Targeting youth in middle and high schools throughout New Jersey, the contest is focused on for four adolescent vaccines: tetanus, diphtheria, acellular pertussis (Tdap), human papillomavirus (HPV), meningococcal conjugate (MCV4) and the flu.

In its third year, Protect Me With 3+ offers prizes to the top three entries in the video and poster categories and the chance for winning entries to be distributed during statewide immunization awareness activities. The top five finalists in each category will be posted on www.protectmewith3.com for public voting in December. A prize for the classroom with the most eligible submissions in each of the poster and video categories will also be awarded, encouraging teachers to leverage the Protect Me With 3+ contest as part of class projects.

The video contest offers an interactive medium for high school students to communicate the importance of adolescent vaccines; participants are required to submit a video up to 30 seconds long, integrating key facts related to one adolescent vaccine. The deadline to submit is November 23.

The new poster contest for fifth to eighth graders encourages submission of original artwork that can be illustrated using crayons or markers. The deadline to submit is November 15.

Submissions for the Protect Me With 3+ video and poster contest are being accepted. Information regarding eligibility, video and poster submission guidelines and contest rules can be found at <http://www.protectmewith3.com>.

October Was Breast Cancer Awareness Month

Governor Christie signed a [proclamation](#) declaring October as Breast Cancer Awareness Month and urged New Jerseyans to observe the month with activities that promote awareness and programs that encourage annual mammograms. The New Jersey Cancer Education and Early Detection (NJCEED) Program provides comprehensive outreach, education and screening services for breast, cervical, colorectal and prostate cancers for low-income residents. To find a NJCEED location visit: <http://www.state.nj.us/health/cancer/njceed/index.shtml>





Image courtesy of Safe to Sleep¹ campaign, Eunice Kennedy Shriver NICHD, <http://www.nichd.nih.gov/sts/> registered trademark of USDHHS

October Was SIDS Awareness Month

Governor Chris Christie signed a proclamation declaring October as Sudden Infant Death Syndrome (SIDS) Awareness Month. In anticipation of this month, the SIDS Center of New Jersey encouraged all providers, programs, and institutions that work with infants, families and other caregivers to call more attention to the safe infant sleep guidelines of the American Academy of Pediatrics for the first 12 months of life. When practices such as positioning an infant on its back to sleep are adopted, the rates of SIDS and of other sleep-related deaths, such as accidental suffocation, decline.

New Jersey's rate of all sudden and unexpected infant deaths, a category that includes SIDS, was one of the lowest in the nation according to 2010 CDC data. However, there is more work to be done to maintain these practices, to encourage change in those who are not following the guidelines and to advise the more than 100,000 families that will welcome a New Jersey newborn each year.

To promote safe infant sleep, The SIDS Center of New Jersey works closely with partners that address the health, social welfare, educational and child care needs of families in order to reach providers across the spectrum and the public. In 2013, the SIDS Center reached over 3,500 individuals in direct, on-site presentations. The New Jersey Department of Health, the Maternal and Child Health Consortia, the Division of Child Protection and Permanency, the NJ Chapter of the American Academy of Pediatrics, and birthing hospitals throughout the State are working collaboratively with the SIDS Center.

Risk reduction and preventive education is one of the mandates of the SIDS Center of New Jersey, a statewide program now in its 26th year. As part of promotion efforts during SIDS Awareness Month, the Center and birthing hospitals have done a number of activities including lectures to providers throughout New Jersey and articles featured in publications.

SIDS Center of New Jersey also provides bereavement support to families whose infants have died suddenly and unexpectedly and to study these deaths. The program is funded by grants from the New Jersey Department of Health to Rutgers Robert Wood Johnson Medical School and the CJ Foundation for SIDS. The development of safe infant sleep guidelines has resulted in a national decline of SIDS deaths from 4,891 in 1992 to 2,058 in 2010, the most recent year with finalized infant mortality data from the CDC.

The SIDS Center of New Jersey encourages all who would like to participate in a safe infant sleep project to call its hotline (1-800-545-7347) or to reach Dr. Ostfeld by email (ostfelba@rwjms.rutgers.edu). The SIDS Center can provide electronic copies of its safe sleep educational material, in English and Spanish, and can advise on awareness projects.

“To promote safe infant sleep, The SIDS Center of New Jersey works closely with partners that address the health, social welfare, educational and child care needs of families in order to reach providers across the spectrum and the public.”

'Cancer Matters'
Brought To You By:

RUTGERS
Cancer Institute
of New Jersey

The Cure for Blood Cancer is in Your Hands

By Vimal D. Patel, MD



Vimal D. Patel, MD, is a medical oncologist in the Blood and Marrow Transplant Program at Rutgers Cancer Institute of New Jersey.



Four minutes. That is how long it may take you to read this article. That is how long it may take you to listen to your favorite song. That is also the length of time that elapses before another person is diagnosed with a blood cancer in the United States. Fifteen people will be diagnosed in the next hour and 360 people will be diagnosed by the end of today. For those diagnosed, their lives will be irrevocably changed. Some will need months of intensive therapies and others will need lifelong treatment.

Blood cancers (like leukemia, lymphoma, myeloma, myelodysplastic syndrome and myeloproliferative disorders) affect the production of blood cells and their many functions, such as fighting off infections or preventing serious bleeding. Most of these cancers start in the bone marrow where blood is produced.

For many patients with blood cancers, a stem cell transplant will be part of their treatment and may be their best or only chance for a cure. Donor stem cells give rise to a new immune system that has the potential to view the cancerous cells as foreign and lead to their eradication.

Approximately 70 percent of patients who need a transplant do not have a matching donor in the family and instead need to rely on the Be The Match Registry through the National Marrow Donor Program and other international cooperative registries. Even with an impressive 11 million donors in the registry, six in 10 patients cannot find a genetic match. The probability is even lower for those of diverse ancestry (i.e. African Americans, American Indians, Alaska natives, Asians including South Asians, Pacific Islanders including Hawaiian natives, Hispanics and multiple races).

Those who register mail back a swab of cheek cells that are used for tissue typing and matching. On average, one in 500 members will be selected to donate their stem cells in one of two ways. Peripheral blood stem cell donation is a non-surgical, outpatient procedure that collects stem cells over a six hour period via the peripheral blood. Bone marrow donation is a 1-2 hour surgical procedure performed under anesthesia where marrow cells are collected from the pelvic bone using a syringe.

As you near the end of this article, one more patient was diagnosed with a blood cancer. That person may need a stem cell transplant in the future. You could be the person that gives them a second chance at life and a potential for a cure.

To learn more about the registry visit <http://bethematch.org>.